

FACSIMILE COVER SHEET

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From: John C. Pokotylo, Esq.

Date: October 4, 2007

Number of Pages Including Cover: 35

MESSAGE: FORMAL SUBMISSION OF:

- 1) Transmittal (1 pg.);
- 2) Fee transmittal (1 pg.)(in duplicate);
- 3) Request for a one (1) Month
Extension of Time (2 pgs.); and
- 4) Amendment (29 pgs.).

Attorney Docket No.: Google-65 (GP-171-00-US)

Appl. No.: 10/732,824

Applicants: Kenneth W. BRONSON, et al.

Filed: December 10, 2003

Title: RETURN OF CONTENT AD SERVING RESOURCES

TC/A.U.: 2168

Examiner: Aaron J. Sanders

CERTIFICATE OF FACSIMILE TRANSMISSION

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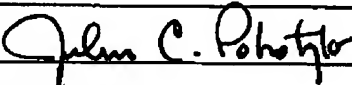
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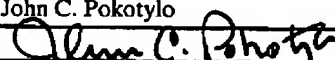
Please type a plus sign (+) inside this box ----> 
 Modified PTO/SB/21 (08-00)
 Approved for use through 10/31/2002, OMB 0651-0031
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/732,824
	Filing Date	December 10, 2003
	First Named Inventor	Kenneth W. BRONSON
	Group Art Unit	2168
	Examiner Name	Aaron J. Sanders
Total Number of Pages in This Submission		Attorney Docket Number Google-65 (GP-171-00-US)

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation/Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Postcard Receipt <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks 		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John C. Pokotylo (Reg. No. 36,242)
Signature	
Date	October 4, 2007

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Signature	
Date	October 4, 2007

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Modified PTO/SB/17 (01-03)

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for FY 2007**

Effective 09/30/2007. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 120.00)

Complete if Known

Application Number	10/732,824
Filing Date	December 10, 2003
First Named Inventor	Kenneth W. BRONSON
Examiner Name	Aaron J. Sanders
Art Unit	2168
Attorney Docket No.	Google-65 (GP-171-00-US)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number
Deposit Account Name

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FEE CALCULATION

1. BASIC FILING, SEARCH & EXAMINATION FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1030	515	Utility fee	
440	220	Design fee	
680	340	Plant fee	
1440	720	Reissue fee	
210	105	Provisional fee	
SUBTOTAL (1)			(\$ 00.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 50	2202 25	Claims in excess of 20
1201 210	2201 105	Independent claims in excess of 3
1203 370	2203 185	Multiple dependent claim, if not paid
1204 210	2204 105	**Reissue independent claims over original patent
1205 50	2205 25	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 00.00)

**or number previously paid, if greater, For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	120.00
1252	480	2252	230	Extension for reply within second month	
1253	1,050	2253	525	Extension for reply within third month	
1254	1,840	2254	820	Extension for reply within fourth month	
1255	2,230	2255	1,115	Extension for reply within fifth month	
1401	510	2401	255	Notice of Appeal	
1402	510	2402	255	Filing a brief in support of an appeal	
1403	1,030	2403	515	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	510	2452	255	Petition to revive - unavoidable	
1453	1,540	2453	770	Petition to revive - unintentional	
1501	1,440	2501	720	Utility issue fee (or reissue)	
1502	820	2502	410	Design issue fee	
1503	1,130	2503	565	Plant issue fee	
Petitions to the Commissioner - check fee sheet					
1807	50	1807	50	Processing fee under 37 CFR 1.17(c)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	810	2809	405	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	810	2810	405	For each additional invention to be examined (37 CFR 1.129(b))	
1801	810	2801	405	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 120.00)

SUBMITTED BY

Name (Print/Type)	John C. Pokotylo	Registration No. (Attorney/Agent)	36,242	Telephone (732) 542-9070
Signature	<i>John C. Pokotylo</i>	Date	October 4, 2007	

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Modified PTO/SB/17 (01-03)

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Multiple Dependent						=	

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